

# Wisconsin Department of Safety and Professional Services

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**Website:** <http://dsps.wi.gov>

## DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

### WALL CERTIFICATE WITH WALLET CARD OR GOVERNOR-SIGNED WALL CERTIFICATE REQUEST FORM

(Please allow 7 to 10 business days for processing.)

#### CUSTOMER INFORMATION

Name of Credential/License Holder:

Credential/License Number(s):

Profession(s):

#### PAYMENT INFORMATION

Mark the appropriate box(es) to indicate type of certificate:

☐ Wall Certificate with Wallet Card (\$10.00 per certificate)

☐ Governor Signed Wall Certificate (\$10.00 per certificate)

☐ Indicate Specialty to be Printed (if any)

**Note: Not all specialties are available for printing. These certificates may be printed in the same format from your personal computer.**

#### Wall Certificate with Wallet



#### Governor Signed Certificate



**Required Information for Processing: You must provide a mailing address and a daytime phone number.**

**Address to send  
certificate(s):** (street, city,  
state, and zip)

**Daytime Phone Number:**

**Email Address:**

**Total Amount to Charge: \$**

**DSPS is only authorized to charge the amount listed. Incorrect amounts will cause delays in processing.**

Cardholder's Address:

Street

City

State

Zip Code

Credit Card Number:

Expiration Date:

Type (Circle One): Visa MC Disc AmEx



3-digit  
security  
code



4-digit  
security  
code

**Note: Please include the  
Security code from  
front/back of card:**

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I UNDERSTAND BY SINGING BELOW, I AUTHORIZE THE STATE OF WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES TO CHARGE MY CREDIT CARD FOR THE ABOVE AMOUNT:

Cardholder's Signature:

DSPS uses RightFax to ensure safe and secure transmission of your payment information.

#3082 (Rev.11/15)

Committed to Equal Opportunity in Employment and Licensing

**For Receipting Purposes**